

# Secure Care Agency Form

**AF**

Student \_\_\_\_\_ Teacher \_\_\_\_\_ Monitor \_\_\_\_\_  
 School \_\_\_\_\_ ID/SAIS \_\_\_\_\_ DOB \_\_\_\_\_ Census Category \_\_\_\_\_  
 No. \_\_\_\_\_  
 Primary language of the home, indicated by parent \_\_\_\_\_ Language in which the student is most proficient \_\_\_\_\_

Citation	I-O-U	Description	Citation	I-O-U	Description
I.A.1.a	_____	Child Find policy reviewed annually by staff and documentation maintained	I.B.1.b	_____	Required procedures for 2.9-5 yrs child find were followed.
I.A.1.b	_____	Child find procedures disseminated to parents	I.B.1.c	_____	Child find for grades K-12 occurs within 45 days of entry.
I.A.2.a	_____	PEA maintains invitation list and agenda for private school involvement.	I.B.1.d	_____	Follow-up occurred if concerns were noted on the 45 day or preschool screening.
I.A.2.b	_____	PEA maintains written affirmations or documentation of efforts from consultation with private schools.	II.A.9.a	_____	Assessments and other evaluation materials are administered in order to yield accurate information.
I.A.2.c	_____	Service plans exist for private school students selected to receive services.	V.A.2.d	_____	All parents provided annual notice of confidentiality
I.B.1.a	_____	Required procedures for birth – 2.9 yr child find were followed			

COMMENTS \_\_\_\_\_  
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